

## National Clearinghouse on Child Abuse and Neglect Information National Adoption Information Clearinghouse







Gateways to Information: Protecting Children and Strengthening Families

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## Human Service Agencies – Coping with Natural Disasters

**Disaster Response Networks in Uncertain Times: Practical Recommendations**. Heaps, Richard A., 2003. Paper presented at the American Psychological Association's Practice Organization State Leadership Conference (Washington, DC, March 3, 2003).

This paper outlines the preparations necessary for state psychological associations to make a timely, well-coordinated, and successful mental health response to disaster or trauma. It is suggested that early planning, recruiting, training, connecting with an authorized disaster organization, forming a mental health coalition, organizing administrative and response procedures and personnel, and developing notification and communication procedures should place a state Disaster Response Network in a good position to adapt to changing demands and successfully provide emergency mental health services when needed.

**Overcoming Disaster Barriers To Service All Children**. Tramonte, Michael R., 2002. Paper presented at the Annual Meeting of the National Association of School Psychologists (34th, Chicago, IL, February 26-March 2, 2002).

This paper contains an outline of a workshop designed for the disaster mental health worker. The goal of the workshop is to describe how disaster services are different from other mental health services and to provide suggestions on how to make these services more effective. The types of disasters, the anatomy of a disaster, and time phases of a disaster are all explained. The barriers to overcome in disaster relief for the helper and the survivor are also highlighted. One particular barrier that needs consideration is the cultural bias that may exist in a counseling relationship. Suggestions are provided for types of individual help that can be given in a disaster. These include food, clothing, housing and funding, medical care, emergency funds, legal assistance, disaster unemployment, and property cleanup. Children's disaster reactions that need to be addressed include academic and behavioral regression, behavioral deficits or excesses, emotional reactions, and motivational changes. (Contains 13 references.)

**Field Manual for Mental Health and Human Service Workers in Major Disasters**. DeWolfe, Deborah J.; Federal Emergency Management Agency, Washington, DC.; Substance Abuse and Mental Health Services Administration (DHHS/PHS), Rockville, MD. Center for Mental Health Services., 2000

This field manual is intended for mental health workers and other human service providers who assist survivors following a disaster. It provides the basics of disaster mental health, with both specific and practical suggestions for workers. Essential information is included about disaster survivors' reactions and needs such as dealing with grief; anxiety over safety for themselves and others; eating and sleeping

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Fax: (703) 385-3206 E-mail: naic@caliber.com http://naic.acf.hhs.gov problems; and the need to talk over the events. Helping skills are described with guidance for when to refer survivors on for further professional assistance. Specific information is provided on how to assist potential risk groups such as children; older adults; people with mental disorders; people in group facilities; and different cultural and ethic groups. The material in this manual is condensed from material contained in the Training and Manual for Mental Health and Human Service Workers in Major Disasters, Second Edition.

**Training Manual for Mental Health and Human Service Workers in Major Disasters.** Second Edition. DeWolfe, Deborah J.; Federal Emergency Management Agency, Washington, DC.; Substance Abuse and Mental Health Services Administration (DHHS/PHS), Rockville, MD. Center for Mental Health Services., 2000.

One of the changes experienced during the past decade has been the occurrence of human-caused disasters. With the rise in the number of such complex events, the Center for Mental Health Services has updated this training manual to assist mental health administrators and workers in developing the training components of crisis counseling. This manual introduces the trainer to the Crisis Counseling Program model, the scope and limits of the program, and elements required for effective service design and delivery. It presents essential information on how the disasters affect children and adults; the importance of tailoring the program to fit the community; descriptions of effective disaster mental health interventions; and strategies for preventing and managing worker stress. The manual contains the following sections: (1) "Background and Overview"; (2) "Responses to Disaster"; (3) "Disaster Reactions of Potential Risk Groups"; (4) "Stress Prevention and Management"; (5) "Setting up Disaster Mental Health Services Training"; (6) Comprehensive Training Course Outline"; and (7) "Additional Training Needs and Options." (Contains 56 references.)

An Evaluation of Community Mental Health Services Following a Massive Natural Disaster. Soliman, Hussein H.; Raymond, Amanda; Lingle, Susan; Human Services in the Rural Environment, v20 n1 p8-13 Sum 1996.

After the Great Flood of 1993, crisis outreach services included casefinding, information and referral, community education, screening, counseling, mental health training, consultation, community organization, and advocacy. In two surveys, survivors rated their satisfaction with service appropriateness, clarity, timeliness, impact, and skillfulness of outreach workers, and key informants evaluated methods, content, and impact of community education. Contains 29 references.

**Crisis intervention with survivors of natural disaster: Lessons from Hurricane Andrew**. Shelby, Janine S.; Tredinnick, Michael G.; Journal of Counseling & Development, Vol 73(5), May-Jun 1995. pp. 491-497.

Presents anecdotal evidence from mental health work with Hurricane Andrew survivors in south Florida and discusses implications for general disaster counseling. The mental health workers served a predominantly lower SES group with diverse ethnic identities, all of whom had been left homeless by the 1992 hurricane. Interventions were based on the belief that enhancing clients' perceived power would restore or improve predisaster functioning. Issues presented by adults included helplessness and a sense of loss, both of which were dealt with through individual counseling, stress reduction techniques, and helping the adults increase their sense of mastery. Children experienced regression and anxiety and were treated through play therapy, drawing, and positive reframing. The effects of multicultural issues are noted.

A Preliminary Investigation of On-the-Scene Coping Mechanisms Used by Disaster Workers. Holaday, Margot; And Others; Journal of *Mental Health* Counseling, v17 n3 p347-59 Jul 1995.

Presents the results of a preliminary investigation of on-the-scene coping mechanisms used by disaster workers. Difference in five strategies employed; Maintaining contact with helper as the strategy judged as most important.

American Red Cross Disaster Mental Health Services: Implementation and Recent Developments. Morgan, Jane; Journal of Mental Health Counseling, v17 n3 p291-300 Jul 1995.

The American Red Cross (ARC) Disaster Mental Health Services program uses a multidisciplinary approach to deliver crisis intervention to disaster workers and victims after hurricanes. Discusses the impetus for the ARC's development of the program, its early implementation, and ongoing challenges in the further development of this approach to disaster services.

A Preliminary Investigation of On-the-Scene Coping Mechanisms Used by Disaster Workers. Holaday, Margot; And Others; Journal of Mental Health Counseling, v17 n3 p347-59 Jul 1995.

Participants from five groups completed a questionnaire that required them to assess their use of 11 coping mechanisms. Participants differed from one another, depending on group affiliation, on five strategies. The strategy judged most important was "maintaining contact with other helpers." Concludes that training programs should provide broad-based training with an emphasis on peer support.

**Coping Skills Training: Evaluating a Training Model**. Holaday, Margot; Smith, Austin; Journal of Mental Health Counseling, v17 n3 p360-67 Jul 1995.

Participants (n=161) viewed a videotaped "disaster" during which they "placed" themselves on the scene as helpers. Results indicate that two groups, those who had received previous training in coping skills versus those who had not, differed significantly in the use of skills and level of psychological comfort.

Countertransference issues in crisis work with natural disaster victims. Karakashian, Meliné; Psychotherapy: Theory, Research, Practice, Training, Vol 31(2), Sum 1994. pp. 334-341.

Effects of trauma work on mental health workers and intervention methods were studied in a group of American mental health professionals who volunteered to provide crisis intervention and a group of Armenian counselors-in-training who were themselves victims of the catastrophic 1988 earthquake in Soviet Armenia. American clinicians' reactions were addressed through psychodynamic peer support group meetings, while a didactic experiential group instruction program resulted in changes in the posttraumatic stress disorder (PTSD) and depression symptoms of indigenous counselors. Issues related to intergenerational trauma, seeing self as victim, repetition compulsion, and assigned roles in the therapeutic relationship are addressed. Benefits of group process in trauma work, training issues, and implications for future research are discussed.